ABSTRAK

Tuberkulosis (TB) paru merupakan penyakit infeksi menular yang membutuhkan pengobatan jangka panjang dan dapat memberikan dampak terhadap kondisi fisik, psikologis, sosial, serta kualitas hidup pasien. Dukungan dan keterlibatan keluarga melalui family caring behaviour dapat membantu pasien dalam menjalani pengobatan, meningkatkan keyakinan terhadap kemampuan diri (self-efficacy), serta mendukung kualitas hidup. Penelitian ini bertujuan untuk mengetahui hubungan family caring behaviour dengan self-efficacy dan kualitas hidup pasien TB paru di RS Royal Prima Medan. Penelitian ini menggunakan metode kuantitatif dengan desain cross-sectional. Populasi penelitian berjumlah 100 pasien TB paru dan sampel sebanyak 50 responden yang ditentukan menggunakan rumus Slovin dengan tingkat kesalahan 10%. Pengumpulan data dilakukan menggunakan kuesioner Family Caring Behaviour, General Self-Efficacy Scale (GSES), dan WHOQOL-BREF. Analisis data dilakukan secara univariat dan bivariat menggunakan uji Chi-Square dengan tingkat kemaknaan $\alpha < 0,05$.

Hasil penelitian menunjukkan bahwa mayoritas responden memiliki family caring behaviour kategori tinggi sebanyak 33 orang (66%), self-efficacy kategori tinggi sebanyak 29 orang (58%), dan kualitas hidup kategori tinggi sebanyak 29 orang (58%). Hasil uji statistik menunjukkan terdapat hubungan yang bermakna antara family caring behaviour dengan self-efficacy pasien TB paru (p-value = 0,000; $p < 0,05$). Selain itu, terdapat hubungan yang bermakna antara family caring behaviour dengan kualitas hidup pasien TB paru (p-value = 0,000; $p < 0,05$). Kesimpulan penelitian ini adalah semakin baik family caring behaviour yang diterima pasien, semakin tinggi self-efficacy dan semakin baik kualitas hidup pasien TB paru. Disarankan agar rumah sakit meningkatkan penerapan family-centered care serta keluarga meningkatkan pendampingan, motivasi, dan dukungan emosional selama pasien menjalani pengobatan.

Kata kunci: Family Caring Behaviour, Self-Efficacy, Kualitas Hidup, Tuberkulosis Paru.

ABSTRACT

Pulmonary tuberculosis (TB) is a communicable infectious disease that requires long-term treatment and may affect patients' physical, psychological, social conditions, and quality of life. Family support and involvement through family caring behaviour may help patients undergo treatment, improve their confidence in their own abilities (self-efficacy), and support their quality of life. This study aimed to determine the relationship between family caring behaviour, self-efficacy, and quality of life among pulmonary TB patients at Royal Prima Medan Hospital. This study employed a quantitative method with a cross-sectional design. The study population consisted of 100 pulmonary TB patients, with a sample of 50 respondents determined using the Slovin formula with a 10% margin of error. Data were collected using the Family Caring Behaviour Questionnaire, General Self-Efficacy Scale (GSES), and WHOQOL-BREF. Data were analyzed using univariate and bivariate analyses with the Chi-Square test at a significance level of $\alpha < 0.05$.

The results showed that the majority of respondents had a high level of family caring behaviour, consisting of 33 respondents (66%), a high level of self-efficacy among 29 respondents (58%), and a high quality of life among 29 respondents (58%). Statistical analysis showed a significant relationship between family caring behaviour and self-efficacy among pulmonary TB patients (p-value = 0.000; $p < 0.05$). Furthermore, there was a significant relationship between family caring behaviour and quality of life among pulmonary TB patients (p-value = 0.000; $p < 0.05$). In conclusion, better family caring behaviour is associated with higher self-efficacy and better quality of life among pulmonary TB patients. It is recommended that the hospital improve the implementation of family-centered care and that families increase assistance, motivation, and emotional support throughout the patient's treatment.

Keywords: Family Caring Behaviour, Self-Efficacy, Quality of Life, Pulmonary Tuberculosis.